

FINANCIAL AFFIDAVIT

IN SUPPORT OF REQUEST FOR ATTORNEY EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OR FEE

Rev. 5/92 IN UNITED STATES MAGISTRATE DISTRICT APPEALS COURT or OTHER PANEL (Specify below)

IN THE CASE

USA V.S. Sil DouetteFOR
AT

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

1 Defendant—Adult
 2 Defendant - Juvenile
 3 Appellant
 4 Probation Violator
 5 Parole Violator
 6 Habeas Petitioner
 7 2255 Petitioner
 8 Material Witness
 9 Other

DOCKET NUMBERS

Magistrate

04-816-MWB

District Court

Court of Appeals

CHARGE/OFFENSE (describe if applicable & check box →) Felony
 Misdemeanor**ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY**

EMPLOYMENT	Are you now <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed	
	Name and address of employer: _____	
	IF YES, how much do you earn per month? \$ _____	IF NO, give month and year of last employment How much did you earn per month? \$ <u>8/99</u> <u>\$960/month</u>
ASSETS	If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____
	IF YES, how much does your Spouse earn per month? \$ _____	
	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	RECEIVED SOURCES
OTHER INCOME	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY \$ _____ THE SOURCES	
	CASH	Have you any cash on hand or money in savings or checking accounts? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ <u>don't know</u>
	PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input type="checkbox"/> No
OBLIGATIONS & DEBTS	IF YES, GIVE THE VALUE AND \$ DESCRIBE IT	VALUE DESCRIPTION

DEPENDENTS	MARITAL STATUS	Total No. of Dependents	List persons you actually support and your relationship to them
	<input checked="" type="checkbox"/> SINGLE	<u>0</u>	
	<input type="checkbox"/> MARRIED		
	<input type="checkbox"/> WIDOWED		
	<input type="checkbox"/> SEPARATED OR		
<input type="checkbox"/> DIVORCED			

DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	APARTMENT OR HOME:	Creditors	Total Debt	Monthly Paymt.
	<u>Rent</u>	<u>\$200/wk</u>	<u>\$200/wk</u>	<u>\$800.00</u>

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

4/8/04SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)→ Sil Douette

Grandfather holds passbook to account